

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	: Karen Giroux	Art Unit	: 1618
Serial No.	: 10/716,577	Examiner	: Blessing M. Fubara
Filed	: November 18, 2003	Docket	: 01435.062US1
Title	: MEDICAL DEVICES EMPLOYING NOVEL POLYMERS		

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In compliance with 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the enclosed materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicant respectfully requests that this Information Disclosure Statement be entered and the documents listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to MPEP 609, Applicant requests that a copy of the Form 1449, initialed as being considered by the Examiner, be returned to the Applicants with the next official communication.

Each item of information contained in the information disclosure statement was first cited in any communication from a foreign patent office in a counterpart application and this communication was not received by any individual designated in § 1.56(c) more than thirty days prior to the filing of the information disclosure statement. Specifically, the Canadian Patent Office cited the document in a communication dated August 30, 2010, which is not greater than thirty days prior to this filing. Accordingly, this information disclosure statement should not be considered a failure to engage in reasonable efforts to conclude prosecution under 37 C.F.R. § 1.704.

Additionally, each item of information contained in the information disclosure statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of the information disclosure statement. Accordingly, the information disclosure statement should be accepted under 37 C.F.R. § 1.97.

Applicant will pay the required fee at the time of electronic filing. The Commissioner is hereby authorized to charge any additional fees to Deposit Account No. 503503 in order to have this Information Disclosure Statement considered. The Examiner is invited to contact the Applicant's

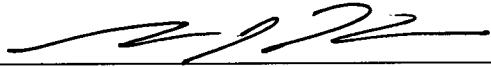
S/N 10/716,577

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Representative at the below-listed telephone number if there are any questions regarding this communication.

Respectfully submitted,

Date: 30 September 2010

By: 

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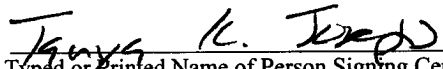
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CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is transmitted electronically to the Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 this 30 day of September 2010.


Typed or Printed Name of Person Signing Certificate


Signature